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From : Barry S. Wilson
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Date : August 1, 2006
Client/Matter No : 068904-0507
User ID No : 3067

MESSAGE:

U.S. Patent Application No: 10/783,950

Following are:

- 1) Request for Continued Examination (RCE) Transmittal (4 pages)
- 2) Credit Card Authorization Payment Form (1 page)

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Cover Page 1 of 1

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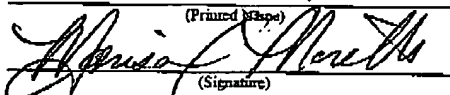
NO. 5427 P. 2

AUG 01 2006

Atty. Dkt. No. 068904-0507

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Hiatt et al.
Title: IMMUNOGLOBULIN
BINDING PROTEIN
ARRAYS IN EUKARYOTIC
CELLS
Appl. No.: 10/783,950
Appl. Filing Date: 2/19/2004
Examiner: Teresa D. Wessendorf
Art Unit: 1639

CERTIFICATE OF FACSIMILE TRANSMISSION I hereby certify that this paper is being facsimile transmitted to the United States Patent and Trademark Office, Alexandria, Virginia on the date below. Marisol Moretto (Printed Name)  (Signature) August 1, 2006 (Date of Deposit)
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REQUEST FOR CONTINUED EXAMINATION (RCE)
TRANSMITTAL

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. This RCE and the enclosed items listed below are being filed prior to the earliest of: (1) payment of the issue fee (unless a petition under 37 C.F.R. § 1.313 is granted); (2) abandonment of the application; or (3) the filing of a notice of appeal to the U.S. Court of Appeals for the Federal Circuit under 35 U.S.C. §141, or the commencement of a civil action under 35 U.S.C. §145 or §146 (unless the appeal or civil action is terminated).

1. Submission required under 37 C.F.R. §1.114: (check items that apply)

a. Previously submitted:

08/02/2006 MBINAS 00000040 10783950

01 FC:2001

395.00 OP

Atty. Dkt. No. 068904-0507

☒ Please enter and consider the Response to Office Action previously filed on July 26, 2006.

☒ Please consider the Affidavit(s)/Declaration(s) previously filed on July 26, 2006.

☐ Please consider the arguments in the Appeal Brief or Reply previously filed on __.

☐ Other __.

b. Enclosed are:

☐ Amendment/Reply.

☐ Affidavit(s)/Declaration(s).

☐ Information Disclosure Statement.

☐ Form PTO-1449 with copies of __ listed reference(s).

☐ Other .

Miscellaneous:

☐ Suspension of action of the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of __ months.

The filing fee is calculated below:

	Claims as Amended	Previously Paid For	Extra Claims Present	Rate	Fee Totals
RCE Fee 1.17(e):				\$790.00	= \$790.00
Total Claims:	41	- 41	= 0	x \$50.00	= \$0.00
Independents	2	- 7	= 0	x \$200.00	= \$0.00

Atty. Dkt. No. 068904-0507

 First presentation of any Multiple Dependent Claims: + \$360.00 = \$0.00

 CLAIMS FEE TOTAL: = \$790.00

☒ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

<input checked="" type="checkbox"/> Extension for response filed within the first month:	\$120.00	1	\$120.00
<input type="checkbox"/> Extension for response filed within the second month:	\$450.00		\$0.00
<input type="checkbox"/> Extension for response filed within the third month:	\$1,020.00		\$0.00
<input type="checkbox"/> Extension for response filed within the fourth month:	\$1,590.00		\$0.00
<input type="checkbox"/> Extension for response filed within the fifth month:	\$2,160.00		\$0.00
EXTENSION FEE SUBTOTAL:			\$120.00
EXTENSION FEE ALREADY PAID: -			\$120.00
EXTENSION FEE TOTAL			\$0.00
CLAIMS AND EXTENSION FEE TOTAL:			\$790.00
<input checked="" type="checkbox"/> Small Entity Fees Apply (subtract ½ of above):			\$395.00
<input type="checkbox"/> Suspension of action requested under 37 C.F.R. § 1.103(c)			\$0.00
TOTAL FEE:			\$395.00

A credit card payment form in the amount of \$395.00 to cover the filing fee is enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by the credit card payment form being unsigned, providing incorrect information resulting in a rejected credit card transaction, or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872.

Atty. Dkt. No. 068904-0507

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 08/01/2006

By Barry S. Wilson

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Barry S. Wilson
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